

**COMMITTEE FOR THE RECALL OF A PUBLIC OFFICER
CONTRIBUTIONS AND EXPENSES**

State of Nevada

Recall Committee - Earl Alfred
Name of Committee for Recall or Representative (print)
PO Box 577 Carlin NV 89822
Mailing Address (include city and zip code)

Ruth Hart
Public Officer to be Recalled
754-6782
Telephone No.

E-Mail Address

Recall 4

CHECK APPROPRIATE BOX(ES):

- ☒ **Report #1 (check appropriate box)**
☒ A special election will be held on 6-26-03 (date)
☐ The petition was not filed before the expiration of the Notice of Intent
☐ The court determined an election will not be held
☐ The public officer resigned

- ☐ **Report #2 (This report must be filed when a special election is held)**
A special election was held on _____ (date)

FILE

MAY 28 2003

DEAN HELLER
SECRETARY OF STATE

CONTRIBUTIONS SUMMARY

"Contribution" means a gift, loan, conveyance, deposit, payment, transfer or distribution of money or anything of value other than the services of a volunteer (NRS 294A.007)

1. Total amount of contributions in excess of \$100
2. Total amount of contributions of \$100 or less
Actual number of contributions of \$100 or less _____
3. Interest and income earned, if any
4. **TOTAL AMOUNT OF ALL CONTRIBUTIONS** (add lines 1 through 3)
5. Total amount of In Kind Contributions

NONE

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EXPENSES SUMMARY

6. Total amount of expenses in excess of \$100
7. Total amount of expenses of \$100 or less
8. Expense for filing fee
9. **TOTAL AMOUNT OF ALL EXPENSES** (add lines 6 through 8)
Remaining Balance (Subtract line 9 from 4)
10. Total amount of In Kind Expenses

NONE

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AFFIRMATION

I declare under penalty of perjury that the foregoing is true and correct.

Earl Alfred
Signature

5-28-03
Date Executed On